

DISTRICT-COUNTY-ROUTE: 10 - AWA-CAL - VAR
CONTRACT NO.: 10a1881
TOTAL BID: \$215,886⁰⁰
BID OPENING DATE: 3/23/2017
BIDDER'S NAME: Quinn Contracting Inc.
DVBE PRIME CONTRACTOR CERTIFICATION¹ _____

Bid Item Number	Description of Work to be Subcontracted to DVBE or Materials to be Supplied by DVBE ²	For Caltrans Only	DVBE (Name, Telephone No., and Certification No.)	\$ Amount
3	Traffic Control System		Roll 'N' Rock Construction Inc (530) 925-1408 DVBE # 1750745	\$20,230 ⁰⁰
Names of first tier DVBE subcontractors and their items of work listed must be consistent with the names and items of work in the Subcontractor List (Pub Cont Code § 4100 et seq.) submitted with the bid. Identify second and lower tier subcontractors on this form.				Total Claimed Participation \$ <u>20,230⁰⁰</u> <u>9.38%</u>

1. DVBE prime contractors must enter their DVBE reference number or their DBA name as listed with Department of General Services (DVBE prime contractors are credited with 100 percent DVBE participation and need not complete the above table).
2. If 100% of an item is not performed or supplied by the DVBEs, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE.
3. The bidder's DVBE information shall include the names of DVBE firms and/or DVBE joint venture partners to be used, that will participate, with a complete description of work or supplies to be provided by each, the dollar value of each DVBE transaction, and a written confirmation on company letterhead from the DVBE that it is participating in the contract. A copy of the DVBE's quote will serve as written confirmation that the DVBE is participating in the contract.

Miguel Quinn
Signature of Bidder

03/22/2017
Date

(707) 693-0289
(Area Code) Telephone Number

Miguel Quinn
Contact Person

(Type or Print)

STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION
BID PROPOSAL FOR UNIT BID ITEMS
 ADM-1509 (7/97) Pg. 1 of 3

PROPOSAL TO THE STATE OF CALIFORNIA
DEPARTMENT OF TRANSPORTATION

APPROXIMATE MAGNITUDE OF WORK

\$ 185,000

For:

IN CALAVERAS AND AMADOR COUNTIES AT VARIOUS LOCATIONS

The undersigned, as bidder, declares that the only persons or parties interested in this proposal as principals are those named herein; that this proposal is made without collusion with any other person, firm or corporation; and the bidder has carefully examined the proposed form of contract and the plans therein referred and the bidder proposes and agrees, if this proposal is accepted, that the bidder will contract with the State of California to provide all necessary labor, materials, tools or equipment and to do all the work specified in the contract, in the time and manner therein prescribed, and that the bidder will take full payment therefore the following unit prices:

Item No.	Cost Code	Item	Unit of Measure	Estimated Quantity	Unit Price (In Figures)	Item Total (In Figures)
1	070030	LEAD COMPLIANCE PLAN	LS	1	2,000 ⁰⁰	2,000 ⁰⁰
2	120090	CONSTRUCTION AREA SIGNS	LS	1	5,000 ⁰⁰	5,000 ⁰⁰
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	40,000 ⁰⁰	40,000 ⁰⁰
4	128652	PORTABLE CHANGEABLE MESSAGE SIGN (LS)	LS	1	5,000 ⁰⁰	5,000 ⁰⁰
5	130100	JOB SITE MANAGEMENT	LS	1	2,000 ⁰⁰	2,000 ⁰⁰
6	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	1,500 ⁰⁰	1,500 ⁰⁰
7	130900	TEMPORARY CONCRETE WASHOUT	LS	1	1,000 ⁰⁰	1,000 ⁰⁰
8	198010	IMPORTED BORROW	CY	26	100 ⁰⁰	2,600 ⁰⁰
9	205035	WOOD MULCH	CY	1.5	500 ⁰⁰	750 ⁰⁰
10	390136	MINOR HOT MIX ASPHALT	TON	4	500 ⁰⁰	2,000 ⁰⁰
11	510526	MINOR CONCRETE (BACKFILL)	TON	20	500 ⁰⁰	10,000 ⁰⁰
12	641113	24" PLASTIC PIPE	LF	20	400 ⁰⁰	8,000 ⁰⁰

STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION
BID PROPOSAL FOR UNIT BID ITEMS
 ADM-1509 (7/97) Pg. 2 of 3

Item No.	Cost Code	Item	Unit of Measure	Estimated Quantity	Unit Price (In Figures)	Item Total (In Figures)
13	665016	18" CORRUGATED STEEL PIPE	LF	88	250 ⁰⁰	22,000 ⁰⁰
14	704500	REMOVED FLARED END SECTION	EA	5	250 ⁰⁰	1,250 ⁰⁰
15	705011	18" STEEL FLARED END SECTION	EA	3	300 ⁰⁰	900 ⁰⁰
16	705031	48" STEEL FLARED END SECTION	EA	2	2,500 ⁰⁰	5,000 ⁰⁰
17	710132	REMOVE CULVERT	LF	105	50 ⁰⁰	5,250 ⁰⁰
18	710360	CLEANING, INSPECTING, AND PREPARING CULVERT	LF	422	35 ⁰⁰	14,770 ⁰⁰
19	710366	CONCRETE INVERT PAVING	CY	20	2,500 ⁰⁰	50,000 ⁰⁰
20	710380	18" CURED-IN-PLACE PIPE LINER	LF	209	174 ⁰⁰	36,366 ⁰⁰
21	870009	MAINTAINING EXISTING TRAFFIC MANAGEMENT SYSTEM ELEMENTS DURING CONSTRUCTION	LS	1	500 ⁰⁰	500 ⁰⁰

TOTAL

215,886⁰⁰

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION
SMALL BUSINESS STATUS
DES-GE-0102.4 (REV 3/2008)

CONTRACT NO. 10a1881

Are you certified as a "Small Business" by the Office of Small Business and DVBE Services of the Department of General Services of the State of California? Check one:

☒ Yes: Certification number? 1770326 ☐ No

Note: This small business questionnaire is included for statistical reporting only.

DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS

STD. 843 (Rev. 5/2008)

Instructions: The disabled veteran (DV) owner(s) and DV manager(s) of the Disabled Veteran Business Enterprise (DVBE) must complete this declaration when a DVBE contractor or subcontractor will provide materials, supplies, services or equipment [Military and Veterans Code Section 999.2]. Violations are misdemeanors and punishable by imprisonment or fine and violators are liable for civil penalties. All signatures are made under penalty of perjury.

SECTION 1Name of certified DVBE: Roll'n Rock Construction Inc. DVBE Ref. Number: 1750745Description (materials/supplies/services/equipment proposed): Traffic ControlSolicitation/Contract Number: 10A1881 SCPRS Ref. Number: _____

(FOR STATE USE ONLY)

SECTION 2**APPLIES TO ALL DVBEs. Check only one box in Section 2 and provide original signatures.**

- ☒ I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code Section 999.2 (b), of materials, supplies, services or equipment listed above. Also, complete Section 3 below if renting equipment.
- ☐ Pursuant to Military and Veterans Code Section 999.2 (f), I (we) declare that the DVBE is a broker or agent for the principal(s) listed below or on an attached sheet(s). (Pursuant to Military and Veterans Code 999.2 (e), State funds expended for equipment rented from equipment brokers pursuant to contracts awarded under this section shall not be credited toward the 3-percent DVBE participation goal.)

All DV owners and managers of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

Bonnie Heile

(Printed Name of DV Owner/Manager)

Bonnie Heile

(Signature of DV Owner/Manager)

3-21-17

(Date Signed)

(Printed Name of DV Owner/Manager)

(Signature of DV Owner/Manager)

(Date Signed)

Firm/Principal for whom the DVBE is acting as a broker or agent:

(If more than one firm, list on extra sheets.)

(Print or Type Name)

Firm/Principal Phone: _____

Address: _____

SECTION 3**APPLIES TO ALL DVBEs THAT RENT EQUIPMENT AND DECLARE THE DVBE IS NOT A BROKER.**

- ☐ Pursuant to Military and Veterans Code Section 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or a DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with Military and Veterans Code Section 999 et. seq.
- ☐ The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented for use in the contract identified above. I (we), the DV owners of the equipment, have submitted to the administering agency my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in Military and Veterans Code 999.2, subsections (c) and (g). Failure by the disabled veteran equipment owner(s) to submit their personal federal tax return(s) to the administering agency as defined in Military and Veterans Code 999.2, subsections (c) and (g), will result in the DVBE being deemed an equipment broker.

Disabled Veteran Owner(s) of the DVBE (attach additional pages with signature blocks for each person to sign):

(Printed Name)

(Signature)

(Date Signed)

(Address of Owner)

(Telephone)

(Tax Identification Number of Owner)

Disabled Veteran Manager(s) of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

(Printed Name of DV Manager)

(Signature of DV Manager)

(Date Signed)

Page ____ of ____



